

FEDERAL COMMUNICATIONS COMMISSION

CLASS OF STATION FM

RITA1

The following application is submitted for action by the Chief, Broadcast Bureau.

ST	FILE NUMBER	CALL	APPLICANT AND LOCATION	NATURE OF APPLICATION
MT	BPH -910925MD N/M	NEW 106.3MHZ	SKYLINE BROADCASTERS, INC. KALISPELL MT	CP FOR NEW FM ON FREQ: 106.3 MHZ; ERP: 1.94 KW (H&V); HAAT: 174 METERS (H&V) 48 09 58 114 19 51

LICENSE EXPIRATION DATE _____

PN. 10-9-91

Sherrita V. White

CHIEF, LICENSE DIVISION

RECOMMENDATION: GRANT() CONSTRUCTION DATES, START _____ END _____

CONTESTED () UNCONTESTED ()

APPROVED _____

FOR CHIEF, BROADCAST BUREAU

F.C.C.-WASHINGTON, D.C.

Approved by OMB
3060-0440
Expires 2/28/93

FEDERAL COMMUNICATIONS COMMISSION
FEE PROCESSING FORM

FOR
FCC
USE
ONLY

FCC/MELLON SEP 25 1991

09-26-91 8195863 001

Please read instructions on back of this form before completing it. Section I MUST be completed. If you are applying for concurrent actions which require you to list more than one Fee Type Code, you must also complete Section II. This form must accompany all payments. Only one Fee Processing Form may be submitted per application or filing. Please type or print legibly. All required blocks must be completed or application/filing will be returned without action.

SECTION I

APPLICANT NAME (Last, first, middle initial)

Skyline Broadcasters, Inc.

ORIGINAL

MAILING ADDRESS (Line 1) (Maximum 35 characters - refer to Instruction (2) on reverse of form)

Fisher, Wayland:JJM

MAILING ADDRESS (Line 2) (If required) (Maximum 35 characters)

1255 23rd Street, N.W., Suite 800

CITY

Washington

STATE OR COUNTRY (If foreign address)

D.C.

ZIP CODE

20037

CALL SIGN OR OTHER FCC IDENTIFIER (If applicable)

NEW(FM)

Enter in Column (A) the correct Fee Type Code for the service you are applying for. Fee Type Codes may be found in FCC Fee Filing Guides. Enter in Column (B) the Fee Multiple, if applicable. Enter in Column (C) the result obtained from multiplying the value of the Fee Type Code in Column (A) by the number entered in Column (B), if any.

(A)

(B)

(C)

FEE TYPE CODE

FEE MULTIPLE
(if required)

FEE DUE FOR FEE TYPE
CODE IN COLUMN (A)

FOR FCC USE ONLY

(1)

M T R

\$ 2,030.00

SECTION II

— To be used only when you are requesting concurrent actions which result in a requirement to list more than one Fee Type Code.

(A)

(B)

(C)

FEE TYPE CODE

FEE MULTIPLE
(if required)

FEE DUE FOR FEE TYPE
CODE IN COLUMN (A)

FOR FCC USE ONLY

(2)

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--	--	--	--

\$

(3)

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SEP 27 1991

\$

(4)

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\$

(5)

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\$

ADD ALL AMOUNTS SHOWN IN COLUMN C, LINES (1) THROUGH (5), AND ENTER THE TOTAL HERE. THIS AMOUNT SHOULD EQUAL YOUR ENCLOSED REMITTANCE.

TOTAL AMOUNT REMITTED
WITH THIS APPLICATION
OR FILING

\$ 2,030.00

FOR FCC USE ONLY

2,030.00

INSTRUCTIONS FOR COMPLETING FEE PROCESSING FORM, FCC FORM 155, March 1991

- (1) **"Applicant Name"** - Enter the name (last, first, middle initial) of the applicant as it appears on the original application or filing being submitted with this Fee Processing Form. If company, enter name which is used commercially.
- (2) **"Mailing Address (Line 1)"** - Enter the street address or post office box number to which the applicant wishes correspondence sent.
- (3) **"Mailing Address (Line 2)"** - This line may be used for further identification of the address if additional space is required.
- (4) **"City"** - Enter the name of the city associated with the given street address.
- (5) **"State or Country"** - Enter the appropriate two-digit state abbreviation as prescribed by the U.S. Postal Service. If address is foreign, enter the appropriate country name here.
- (6) **"ZIP Code"** - Enter the appropriate five or nine-digit ZIP code prescribed by the U.S. Postal Service.
- (7) **"Call Sign or Other FCC Identifier"** - Enter an applicable call sign or unique FCC identifier, if any, as shown on your attached application or filing. If applying for a service affecting more than one call sign, enter one call sign only.
- (8) **Column (A), "Fee Type Code"** - Enter correct Fee Type Code(s) from the appropriate Fee Filing Guide. Only one Fee Processing Form may be submitted per application or filing. Inaccurate or erroneous Fee Type Codes may result in your application or filing being returned to you without further processing.
- (9) **Column (B), "Fee Multiple"** - Certain applications and filings may request action with respect to more than one station, license, frequency, or party and can be submitted together with one check if they meet specific conditions. This column is used only if a multiple, i.e., two or more, is being applied for. Examples of when this would be used are renewing more than one call sign, frequency, station, or the transfer of control of more than one station. Refer to the appropriate Fee Filing Guide for additional information.
- (10) **Column (C), "Fee Due For Fee Type Code in Column (A)"** - Enter in this block the amount of the fee associated with the Fee Type Code shown in Column (A) (times (x) the fee multiple, if required).
- (11) **"Total Amount Remitted With This Application or Filing"** - Enter the total of lines (1) through (5) of Column (C). This amount should equal the amount of your check or money order. We will not accept multiple checks.

HOW TO SUBMIT APPLICATIONS AND FILINGS

- o Each application or filing should be assembled with the Fee Processing Form, FCC Form 155, stapled to the top of the application with the check placed on top of the Fee Processing Form. **DO NOT STAPLE THE CHECK TO THE APPLICATION OR FEE PROCESSING FORM, FCC FORM 155.** Required copies of applications should be clearly identified as "duplicate copy" and placed behind the original package. **"Stamp and receipt" copies should be placed on top of the original package and CLEARLY identified as return copies.** Extraneous material and extra copies should be avoided at all times. Failure to follow these instructions will delay the processing of your submission.
- o Completed applications or filings should be mailed to the proper address shown in the Fee Filing Guide for the particular service for which you are applying or making a filing. **All applications and filings must be properly addressed to the appropriate P.O. box number,** even if hand delivered to the address listed below. Applications received before midnight on a normal business day will receive that day's date as the receipt date. Deliveries made after midnight on Fridays will not be "officially" receipted until the next Monday. Applications received on weekends and government holidays are dated the next regular business day.
- o A single check, bank draft or money order made payable to the Federal Communications Commission and denominated in U.S. dollars and drawn upon a U.S. financial institution must be included with each application or filing requiring a fee. No postdated, altered or third-party checks will be accepted. Do not send cash.
- o Parties hand delivering applications or filings may receive dated receipt copies by presenting copies of the applications or filings to the acceptance clerk at the time of delivery. **Receipts will be provided for mail-in applications or filings if an extra copy of the application or filing is provided along with a self-addressed stamped envelope. Only one piece of paper per application or filing will be stamped for receipt purposes.**

REMEMBER

- o A separate completed Fee Processing Form is required with each application or filing except in certain circumstances. Please refer to the appropriate Fee Filing Guide for additional information.
- o A wrong Fee Type Code or incorrect remittance may result in your application or filing being returned without processing, or result in the dismissal of your application or filing. Please ensure that FEE TYPE CODES are correct and that your check or money order equals the amount shown in the TOTAL AMOUNT REMITTED WITH THIS APPLICATION OR FILING block before submitting your application or filing.
- o If you have any questions completing this form, please call the Fees Hotline, 202/632-FEES.

FCC NOTICE FOR INDIVIDUALS REQUIRED BY THE PRIVACY ACT AND THE PAPERWORK REDUCTION ACT

Part 1, Subpart G of the Commission's rules authorize the FCC to request the information on this form. The information requested is required in order to obtain a license or authorization from the Commission. The purpose of the information is to provide a means to link a fee payment to a specific invoice, application or filing. The information will be used by the Commission to maintain data concerning fees paid to the Commission, for internal financial control, audit, and reporting purposes. Information requested on this form will be available to the public. Your response is required to obtain a license or other authorization from the Commission.

Public reporting burden for this collection of information is estimated to average 10 minutes per response, including the time for reviewing instructions, searching data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Federal Communications Commission, Office of Managing Director, Washington, DC 20554, and to the Office of Management and Budget, Paperwork Reduction Project (3060-0440), Washington, DC 20503.

**This address is for hand carry
or courier delivery only:**



Federal Communications Commission
c/o Mellon Bank
Three Mellon Bank Center
525 William Penn Way
27th Floor, Rm. 153-2713
Pittsburgh, Pennsylvania
(Attention: Wholesale Lockbox Shift Supervisor)

ORIGINAL

LAW OFFICES

FISHER, WAYLAND, COOPER AND LEADER

1255 TWENTY-THIRD STREET, N.W.

SUITE 800

WASHINGTON, D. C. 20037-1170

TELEPHONE (202) 659-3494

TELECOPIER (202) 296-6518

WRITER'S DIRECT NUMBER

(202) 775-3544

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(1890-1954)

CHARLES V. WAYLAND
(1910-1980)

OF COUNSEL
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KAREN M. CORR*
JOAN A. SULLIVAN*
LAUREN ANN LYNCH*
BRIAN J. CARTER

September 25, 1991

*NOT ADMITTED IN D.C.

Federal Communications Commission
Mass Media Services
P.O. Box 358195
Pittsburgh, Pennsylvania 15251-5195

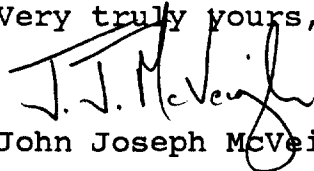
VIA COURIER SERVICE

Re: FCC Form 301, Fee Code MTR
NEW(FM), Channel 292A,
Kalispell, Montana
Skyline Broadcasters, Inc.
File No. BPH-910925__

Gentlemen:

Enclosed please find, in triplicate, the application of Skyline Broadcasters, Inc. for construction permit for a new FM broadcast station to serve Kalispell, Montana on Channel 292A. We also enclose a \$2030.00 check payable to the FCC and a completed Fee Processing Form to cover the requisite filing fee. Should there be any questions, please contact this office.

Very truly yours,


John Joseph McVeigh

JJM:bap
8239-001

Enclosure

APPLICATION FOR CONSTRUCTION PERMIT FOR COMMERCIAL BROADCAST STATION

For COMMISSION Fee Use Only	FEE NO:	For APPLICANT Fee Use Only Is a fee submitted with this application? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If fee exempt (see 47 C.F.R. Section 1.1112), indicate reason therefor (check one box): <input type="checkbox"/> Noncommercial educational licensee <input type="checkbox"/> Governmental entity
	FEE TYPE:	
	FEE AMT:	
	ID SEQ:	FOR COMMISSION USE ONLY FILE NO. BPH-910925 MD

Section I - GENERAL INFORMATION

1. Name of Applicant SKYLINE BROADCASTERS, INC			Send notices and communications to the following person at the address below: Name LARRY SPOONER, MANAGER		
Street Address or P.O. Box P O BOX 169			Street Address or P.O. Box P O BOX 169		
City KALISPELL	State MONTANA	ZIP Code 59903	City KALISPELL	State MONTANA	ZIP Code 59903
Telephone No. (Include Area Code) 406-752-2600			Telephone No. (Include Area Code) 406-752-2600		

2. This application is for: ☐ AM ☒ FM ☐ TV

(a) Channel No. or Frequency 292A 106.3MHZ	(b) Principal Community	City KALISPELL	State MONTANA
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(c) Check one of the following boxes:

☒ Application for **NEW** station

☐ MAJOR change in licensed facilities; call sign: _____

☐ MINOR change in licensed facilities; call sign: _____

☐ MAJOR modification of construction permit; call sign: _____

File No. of construction permit: _____

☐ MINOR modification of construction permit; call sign: _____

File No. of construction permit: _____

☐ AMENDMENT to pending application; Application file number: _____

NOTE: It is not necessary to use this form to amend a previously filed application. Should you do so, however, please submit only Section I and those other portions of the form that contain the amended information.

3. Is this application mutually exclusive with a renewal application? ☐ Yes ☒ No

If Yes, state:	Call letters	Community of License	
		City	State

Section II - LEGAL QUALIFICATIONS

Name of Applicant

SKYLINE BROADCASTERS, INC

1. Applicant is: (check one box below)

- ☐ Individual ☐ General partnership ☒ For-profit corporation
☐ Other ☐ Limited partnership ☐ Not-for-profit corporation

2. If the applicant is an unincorporated association or a legal entity other than an individual, partnership, or corporation, describe in an Exhibit the nature of the application.

Exhibit No.
N/A

NOTE: The terms "applicant," "parties to this application," and "non-party equity owners in the applicant" are defined in the instructions for Section II of this form. Complete information as to each "party to this application" and each "non-party equity owner in the applicant" is required. If the applicant considers that to furnish complete information would pose an unreasonable burden, it may request that the Commission waive the strict terms of this requirement with appropriate justification.

3. If the applicant is not an individual, provide the date and place of filing of the applicant's enabling charter (e.g., a limited partnership must identify its certificate of limited partnership and a corporation must identify its articles of incorporation by date and place of filing):

ARTICLES OF INCORPORATION

Date APRIL 3, 1958

Place HELENA, MONTANA

SECRETARY OF STATE

In the event there is no requirement that the enabling charter be filed with the state, the applicant shall include the enabling charter in the applicant's public inspection file. If, in the case of a partnership, the enabling charter does not include the partnership agreement itself, the applicant shall include a copy of the agreement in the applicant's public inspection file.

4. Are there any documents, instruments, contracts or understandings (written or oral), other than instruments identified in response to Question 3 above, relating to future ownership interests in the applicant, including but not limited to, insulated limited partnership shares, nonvoting stock interests, beneficial stock ownership interests, options, rights of first refusal, or debentures?

☐ Yes ☒ No

If Yes, submit as an Exhibit all such written documents, instruments, contracts, or understandings, and provide the particulars of any oral agreement.

Exhibit No.
N/A

5. Complete, if applicable, the following certifications:

(a) Applicant certifies that no limited partner will be involved in any material respect in the management or operation of the proposed station.

☐ Yes ☐ No N/A

If No, applicant must complete Question 6 below with respect to all limited partners actively involved in the media activities of the partnership.

(b) Does any investment company (as defined in 15 U.S.C. Section 80 a-3), insurance company, or trust department of any bank have an aggregated holding of greater than 5% but less than 10% of the outstanding votes of the applicant?

☐ Yes ☒ No

If Yes, applicant certifies that the entity holding such interest exercises no influence or control over the applicant, directly or indirectly, and has no representatives among the officers and directors of the applicant.

☐ Yes ☐ No N/A

Section II - LEGAL QUALIFICATIONS (Page 2)

6. List the applicant, parties to the application and non-party equity owners in the applicant. Use one column for each individual or entity. Attach additional pages if necessary.

(Read carefully - The numbered items below refer to line numbers in the following table.)

1. Name and residence of the applicant and, if applicable, its officers, directors, stockholders, or partners (if other than individual also show name, address and citizenship of natural person authorized to vote the stock). List the applicant first, officers next, then directors and, thereafter, remaining stockholders and partners.

2. Citizenship.

3. Office or directorship held.

4. Number of shares or nature of partnership interests.

5. Number of votes.

6. Percentage of votes.

7. Other existing attributable interests in any broadcast station, including the nature and size of such interests.

8. All other ownership interests of 5% or more (whether or not attributable), as well as any corporate officer or directorship, in broadcast, cable, or newspaper entities in the same market or with overlapping signals in the same broadcast service, as described in 47 C.F.R. Section 73.3555 and 76.501, including the nature and size of such interests and the positions held.

1.	SKYLINE BROADCASTERS, INC 2995 Hiway 93 South P O Box 169 Kalispell, Montana 59901	M. A. Hims1 305 4th Ave East Kalispell, Montana	Ambrose G. Measure 1400 4th Street West Kalispell, Montana
2.	Montana Corporation	United States of America	United States of America
3.	Applicant	President & Director	Exec Secretary & Director
4.	300 Shares Common Stock	100 Shares	75 Shares
5.	300 Total Authorized, Issued and Outstanding	100 Votes	75 Votes
6.	100% Total	33.33%	25%
7.	Licensee of Radio Station KGEZ AM Kalispell, Montana	---	---
8.	None	---	---

Section II - LEGAL QUALIFICATIONS (Page 2)

6. List the applicant, parties to the application and non party equity owners in the applicant. Use one column for each individual or entity. Attach additional pages if necessary.

(Read carefully - The numbered items below refer to line numbers in the following table.)

1. Name and residence of the applicant and, if applicable, its officers, directors, stockholders, or partners (if other than individual also show name, address and citizenship of natural person authorized to vote the stock). List the applicant first, officers next, then directors and, thereafter, remaining stockholders and partners.

2. Citizenship.

3. Office or directorship held.

4. Number of shares or nature of partnership interests.

5. Number of votes.
6. Percentage of votes.

7. Other existing attributable interests in any broadcast station, including the nature and size of such interests.

8. All other ownership interests of 5% or more (whether or not attributable), as well as any corporate officership or directorship, in broadcast, cable, or newspaper outlets in the same market or with overlapping signals in the same broadcast service, as described in 47 C.F.R. Section 73.3555 and 73.3601, including the nature and size of such interests and the positions held.

1.	C. M. Anzjon 1030 Woodland Drive Kalispell, Montana	Lorraine K. Bundrock 311 10th Ave West Kalispell, Montana	
2.	United States of America	United States of America	
3.	Vice President & Director	Board Member & Director	
4.	100 Shares	25 Shares	
5.	100 Votes	25 Votes	
6.	33.33%	8.33%	
7.	---	---	
8.	---	---	

Does the applicant, any party to the application or any non-party equity owner in the applicant have, or have they had, any interest in:

- (a) a broadcast station, or pending broadcast station application before the Commission?
- (b) a broadcast application which has been dismissed with prejudice by the Commission?
- (c) a broadcast application which has been denied by the Commission?
- (d) a broadcast station, the license of which has been revoked?
- (e) a broadcast application in any pending or concluded Commission proceeding which left unresolved character issues against the applicant?

☒ Yes ☐ No

☐ Yes ☒ No

☐ Yes ☒ No

☐ Yes ☒ No

☐ Yes ☒ No

If the answer to any of the questions in (a)-(e) above is Yes, state in an Exhibit the following information:

Exhibit No.
1

- (1) Name of party having interest;
- (2) Nature of interest or connection, giving dates;
- (3) Call letters of stations or file number of application or docket; and
- (4) Location.

- (a) Are any of the parties to the application or non-party equity owners in the applicant related (as husband, wife, father, mother, brother, sister, son or daughter) to each other?
- (b) Does any member of the immediate family (i.e., husband, wife, father, mother, brother, sister, son or daughter) of any party to the application or non-party equity owner in the applicant have any interest in or connection with any other broadcast station, pending broadcast application or newspaper in the same area (see Section 73.3555(c)) or, in the case of a television station applicant only, a cable television system in the same area (see Section 76.501(a))?

☒ Yes ☐ No

☐ Yes ☒ No

If the answer to (a) or (b) above is Yes, attach an Exhibit giving full disclosure concerning the persons involved, their relationship, the nature and extent of such interest or connection, the file number of such application, and the location of such station or proposed station.

Exhibit No.
2

- 1. State in an Exhibit any interest the applicant or any party to this application proposes to divest in the event of a grant of this application.

Exhibit No.
N/A

OTHER MASS MEDIA INTERESTS

- 0. (a) Do individuals or entities holding nonattributable interests of 5% or more in the applicant have an attributable ownership interest or corporate officership or directorship in a broadcast station, newspaper or CATV system in the same area? (See Instruction 8 to Section 11.)
- (b) Does any member of the immediate family (i.e., husband, wife, father, mother, brother, sister, son or daughter) of an individual holding a nonattributable interest of 5% or more in the applicant have any interest in or connection with any other broadcast station, pending broadcast application, newspaper in the same area (see Section 73.3555(c)), or, in the case of a television station applicant only, a cable television system in the same area (see Section 76.501(a))?

☐ Yes ☐ No N/A

☐ Yes ☐ No N/A

If the answer to (a) and/or (b) above is Yes, attach an Exhibit giving a full disclosure concerning the persons involved, their relationship, the nature and extent of such interest or connection, the file number of such application, and the location of such station or proposed station.

Exhibit No.
N/A

Section 11 - LEGAL QUALIFICATIONS (Page 4)

CITIZENSHIP AND OTHER STATUTORY REQUIREMENTS

11. (a) Is the applicant in violation of the provisions of Section 310 of the Communications Act of 1934, as amended, relating to interests of aliens and foreign governments? (See Instruction C to Section 11.)

☐ Yes ☒ No

(b) Will any funds, credits or other financial assistance for the construction, purchase or operation of the station(s) be provided by aliens, foreign entities, domestic entities controlled by aliens, or their agents?

☐ Yes ☒ No

If the answer to (b) above is Yes, attach an Exhibit giving full disclosure concerning this assistance.

Exhibit No.
N.A.

12. (a) Has an adverse finding been made or an adverse final action been taken by any court or administrative body as to the applicant, any party to this application, or any non-party equity owner in the applicant in a civil or criminal proceeding brought under the provisions of any law related to the following:

Any felony; broadcast related antitrust or unfair competition; criminal fraud or fraud before another governmental unit; or discrimination?

☐ Yes ☒ No

(b) Is there now pending in any court or administrative body any proceeding involving any of the matters referred to in (a) above?

☐ Yes ☒ No

If the answer to (a) and/or (b) above is Yes, attach an Exhibit giving full disclosure concerning persons and matters involved, including an identification of the court or administrative body and the proceeding (by dates and file numbers), a statement of the facts upon which the proceeding is or was based or the nature of the offense alleged or committed, and a description of the current status or disposition of the matter.

Exhibit No.
N.A.

SECTION III - FINANCIAL QUALIFICATIONS

NOTE: If this application is for a change in an operating facility do not fill out this section.

1. The applicant certifies that sufficient net liquid assets are on hand or that sufficient funds are available from committed sources to construct and operate the requested facilities for three months without revenue.

☒ Yes ☐ No

2. State the total funds you estimate are necessary to construct and operate the requested facility for three months without revenue.

\$ 300,000

3. Identify each source of funds, including the name, address, and telephone number of the source (and a contact person if the source is an entity), the relationship (if any) of the source to the applicant, and the amount of funds to be supplied by each source. EACH SHAREHOLDER SHALL CONTRIBUTE PER RATA TO THE CAPITAL, TO COVER THE COST OF CONSTRUCTION AND OPERATION

Source of Funds (Name and Address)	Telephone Number	Relationship	Amount
M. A. Hims1 305 4th Ave East Kalispell, Montana	406-257-2492	Shareholder	100,000
Ambrose G. Measure 1400 4th Street West Kalispell, Montana	406-257-2374	Shareholder	75,000
C. M. Anzjon 1030 Woodland Drive Kalispell, Montana	406-755-5211	Shareholder	100,000
Loraine Bundrock 311 10th Ave West Kalispell, Montana	406-257-5395	Shareholder	25,000

Section IV-A - PROGRAM SERVICE STATEMENT

Attach as an Exhibit, a brief description, in narrative form, of the planned programming service relating to the issues of public concern facing the proposed service area.

Exhibit No. 3

Section IV-B - INTEGRATION STATEMENT

Attach as an Exhibit the information required in 1. and 2. below.

Exhibit No. N/A

1. List each principal of the applicant who, in the event of a grant of the application on a comparative basis proposes to participate in the management of the proposed facility and, with respect to each such principal, state whether he or she will work full-time (minimum 40 hours per week) or part-time (minimum 20 hours per week) and briefly describe the proposed position and duties.
2. State with respect to each principal identified in response to Item 1. above, whether the applicant will claim qualitative credit for any of the following enhancement factors:

(a) Minority Status

(b) Past Local Residence

If Yes, specify whether in the community of license or service area and the corresponding dates.

(c) Female Status

(d) Broadcast Experience

If Yes, list each employer and position and corresponding dates.

(e) Daytime Preference

APPLICANT DOES NOT INTEND AT THIS TIME TO CLAIM INTEGRATION CREDIT.

SECTION VI - EQUAL EMPLOYMENT OPPORTUNITY PROGRAM

1. Does the applicant propose to employ five or more full-time employees?

☒ Yes ☐ No

If Yes, the applicant must include an EEO program called for in the separate Broadcast Equal Employment Opportunity Program Report (FCC 896-A).

SECTION VII - CERTIFICATIONS

1. Has or will the applicant comply with the public notice requirement of 47 C.F.R. Section 73.3580?

☒ Yes ☐ No

2. Has the applicant reasonable assurance, in good faith, that the site or structure proposed in Section V of this form, as the location of its transmitting antenna, will be available to the applicant for the applicant's intended purpose?

☒ Yes ☐ No

If No, attach as an Exhibit, a full explanation.

Exhibit No. N/A

3. If reasonable assurance is not based on applicant's ownership of the proposed site or structure, applicant certifies that it has obtained such reasonable assurance by contacting the owner or person possessing control of the site or structure.

Name of Person Contacted

Mark Ransom

Telephone No. (include area code)

406-543-7106

Person contacted: (check one box below)

☒ Owner☐ Owner's Agent☐ Other (specify)

The APPLICANT hereby waives any claim to the use of any particular frequency as against the regulatory power of the United States because of the previous use of the same, whether by license or otherwise, and requests an authorization in accordance with this application. (See Section 304 of the Communications Act of 1934, as amended.)

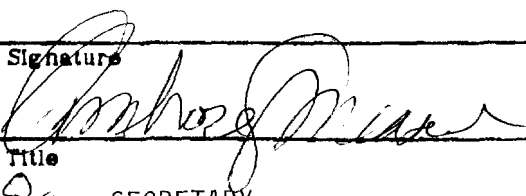
The APPLICANT acknowledges that all the statements made in this application and attached exhibits are considered material representations, and that all exhibits are a material part hereof and incorporated herein.

The APPLICANT represents that this application is not filed for the purpose of impeding, obstructing, or delaying determination on any other application with which it may be in conflict.

In accordance with 47 C.F.R. Section 1.65, the APPLICANT has a continuing obligation to advise the Commission, through amendments, of any substantial and significant changes in information furnished.

**WILLFUL FALSE STATEMENTS MADE ON THIS FORM ARE PUNISHABLE BY FINE AND IMPRISONMENT.
U.S. CODE, TITLE 18, SECTION 1001.**

I certify that the statements in this application are true and correct to the best of my knowledge and belief, and are made in good faith.

Name of Applicant SKYLINE BROADCASTERS, INC	Signature 
Date SEPTEMBER 24, 1991	Title Exec SECRETARY

**FCC NOTICE TO INDIVIDUALS REQUIRED BY THE PRIVACY ACT
AND THE PAPERWORK REDUCTION ACT**

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Public reporting burden for this collection of information is estimated to vary from 71 hours 45 minutes to 301 hours 30 minutes with an average of 118 hours 28 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, can be sent to the Federal Communications Commission, Office of Managing Director, Washington, D.C. 20554, and to the Office of Management and Budget, Paperwork Reduction Project (3060-0027), Washington, D.C. 20503.

THE FOREGOING NOTICE IS REQUIRED BY THE PRIVACY ACT OF 1974, P.L. 93-579, DECEMBER 31, 1974, 5 U.S.C. 52a(k)(3), AND THE PAPERWORK REDUCTION ACT OF 1980, P.L. 96-511, DECEMBER 11, 1980, 44 U.S.C. 3507.

FCC Form 301
New (FM) Channel 292A
Kalispell, Montana
Sept, 1991
Skyline Broadcasters, Inc.

EXHIBIT NO 1

Skyline Broadcasters, Inc. Licensee. Owners of KGEZ AM Radio 600 KHZ in
Kalispell, Montana since April 3, 1958.

FCC Form 301
New (FM) Channel 292A
Kalispell, Montana
Sept, 1991
Skyline Broadcasters, Inc

EXHIBIT NO 2

Loraine Bundrock a 25 share owner in Skyline Broadcasters, Inc is the daughter of Ambrose G. Measure, a 75 share owner of Skyline Broadcasters, Inc. She has been a board member since July 15, 1974.

FCC Form 301
New (FM) Channel 292A
Kalispell, Montana
Sept, 1991
Skyline Broadcasters, Inc.

EXHIBIT NO 3

As the successful applicant for this construction permit, our planned programming would be to and for the listeners of the Kalispell area. The reason for a Class A application is to serve only the Kalispell area with music, news, sports and advertising; without the need to solicit income, in the form of advertising, from outside our local area. Other area broadcasters have AM stations of 10 Kilowatts to 50 Kilowatts and all of the other FM stations are high power Class C operations. Thru our AM broadcast facility we get a much broader look at the Kalispell area radio programming needs and we are unable to fill all these needs with only our AM facility.

Were the proposed station in operation today, the following are among the issues facing the community of license which the station would address with its non entertainment programming:

1. Unemployment
2. Drug abuse
3. Environmental issues
4. Reconstruction of the logging industry
5. Educational concerns
6. Property tax reform

Federal Communications Commission
Washington, D.C. 20554Approved by C
3080-0120
Expires 9/30**BROADCAST EQUAL EMPLOYMENT OPPORTUNITY
MODEL PROGRAM REPORT**

1. APPLICANT

Name of Applicant SKYLINE BROADCASTERS, INC	Address 2995 HIWAY 93 SOUTH P O BOX 169 KALISPELL, MONTANA 59901
Telephone Number (include area code) 406-752-2600	

2. This form is being submitted in conjunction with:

- ☒ Application for Construction Permit for New Station ☐ Application for Assignment of License
- ☐ Application for Transfer of Control
- (a) Call letters (or channel number of frequency)
- (b) Community of License (city and state)
- (c) Service: ☐ AM ☒ FM ☐ TV ☐ Other (Specify)

INSTRUCTIONS

Applicants seeking authority to construct a new commercial, noncommercial or international broadcast station, applicants seek authority to obtain assignment of the construction permit or license of such a station, and applicants seeking authority to acquire control of an entity holding such construction permit or license are required to afford equal employment opportunity to all qualified persons and to refrain from discrimination in employment and related benefits on the basis of race, color, religion, national origin, sex. See Section 73.2080 of the Commission's Rules. Pursuant to these requirements, an applicant who proposes to employ five or more full-time employees must establish a program designed to assure equal employment opportunity for women and minority groups (that is, Blacks not of Hispanic origin, Asians or Pacific Islanders, American Indians or Alaskan Natives and Hispanics). This is submitted to the Commission as the Model EEO Program. If minority group representation in the available labor force is less than five percent (the aggregate), a program for minority group members is not required. In such cases, a statement so indicating must be set forth in the EEO model program. However, a program must be filed for women since they comprise a significant percentage of virtually all labor forces. If an applicant proposes to employ fewer than five full-time employees, no EEO program for women or minority need be filed.

Guidelines for a Model EEO Program and a Model EEO Program are attached.**NOTE:** Check appropriate box, sign the certification below and return to FCC:

- ☐ Station will employ fewer than 5 full-time employees; therefore no written program is being submitted.
- ☒ Station will employ 5 or more full-time employees. Our Model EEO Program is attached. (You must complete all sections of this form.)

I certify that the statements made herein are true, complete, and correct to the best of my knowledge and belief, and are made in good faith.

Signed and dated this 24 day of SEPTEMBER, 19 91

Signed

Title

SECRETARY**WILLFUL FALSE STATEMENTS MADE ON THIS FORM ARE PUNISHABLE BY FINE AND IMPRISONMENT.
U.S. CODE, TITLE 18, SECTION 1001.**

GUIDELINES TO THE MODEL EEO PROGRAM

The model EEO program adopted by the Commission for construction permit applicants, assignees and transferees contains five sections designed to assist the applicant in establishing an effective EEO program for its station. The specific elements which should be addressed are as follows:

I. GENERAL POLICY

The first section of the program should contain a statement by the applicant that it will afford equal employment opportunity in all personnel actions without regard to race, color, religion, national origin or sex, and that it has adopted an EEO program which is designed to fully utilize the skills of qualified minorities and women in the relevant available labor force.

II. RESPONSIBILITY FOR IMPLEMENTATION

This section calls for the name (if known) and title of the official who will be designated by the applicant to have responsibility for implementing the station's program.

III. POLICY DISSEMINATION

The purpose of this section is to disclose the manner in which the station's EEO policy will be communicated to employees and prospective employees. The applicant's program should indicate whether it: (a) intends to utilize an employment application form which contains a notice informing job applicants that discrimination is prohibited and that persons who believe that they have been discriminated against may notify appropriate governmental agencies; (b) will post a notice which informs job applicants and employees that the applicant is an equal opportunity employer and that they may notify appropriate governmental authorities if they believe that they have been discriminated against; and (c) will seek the cooperation of labor unions, if represented at the station, in the implementation of its EEO program and in the inclusion of nondiscrimination provisions in union contracts. The applicant should also set forth any other methods it proposes to utilize in conveying its EEO policy (e.g., orientation materials, on-air announcements, station newsletter) to employees and prospective employees.

IV. RECRUITMENT

The applicant should specify the recruitment sources and other techniques it proposes to use to attract qualified minority and female job applicants. Not all of the categories of recruitment sources need be utilized. The purpose of the listing is to assist the applicant in developing specialized referral sources to establish a pool of qualified minorities and women who can be contacted as job opportunities occur. Sources which subsequently prove to be nonproductive should not be relied on and new sources should be sought.

V. TRAINING

Training programs are not mandatory. Each applicant is expected to decide, depending upon its own individual situation, whether a training program is feasible and would assist in its effort to increase the available pool of qualified minority and female applicants. Additionally, the applicant may set forth any other assistance it proposes to give to students, schools or colleges which is designed to be of benefit to minorities and women interested in entering the broadcasting field. The beneficiary of such assistance should be listed, as well as the form of assistance, such as contributions to scholarships, participation in work study programs, and the like.

MODEL EQUAL EMPLOYMENT OPPORTUNITY PROGRAM

I. GENERAL POLICY

It will be our policy to provide employment opportunity to all qualified individuals without regard to their race, color, religion, national origin or sex in all personnel actions including recruitment, evaluation, selection, promotion, compensation, training and termination.

It will also be our policy to promote the realization of equal employment opportunity through a positive, continuing program of specific practices designed to ensure the full realization of equal employment opportunity without regard to race, color, religion, national origin or sex.

To make this policy effective, and to ensure conformance with the Rules and Regulations of the Federal Communications Commission, we have adopted an Equal Employment Opportunity Program which includes the following elements:

II. RESPONSIBILITY FOR IMPLEMENTATION

(Name/Title) Lawrence M. Spooner, General Manager will be responsible for the administration and implementation of our Equal Employment Opportunity Program. It will also be the responsibility of all persons making employment decisions with respect to the recruitment, evaluation, selection, promotion, compensation, training and termination of employees to ensure that our policy and program is adhered to and that no person is discriminated against in employment because of race, color, religion, national origin or sex.

III. POLICY DISSEMINATION

To assure that all members of the staff are cognizant of our equal employment opportunity policy and their individual responsibilities in carrying out this policy, the following communication efforts will be made:

- ☒ The station's employment application form will contain a notice informing prospective employees that discrimination because of race, color, religion, national origin or sex is prohibited and that they may notify the appropriate local, State or Federal agency if they believe they have been the victims of discrimination.
- ☒ Appropriate notices will be posted informing applicants and employees that the station is an Equal Opportunity Employer and of their right to notify an appropriate local, State or Federal agency if they believe they have been the victims of discrimination.
- ☒ We will seek the cooperation of unions, if represented at the station, to help implement our EEO program and all union contracts will contain a nondiscrimination clause.
- ☐ Other (specify)

MINORITS IN THE AGGREGATE COMPRISE LESS THAN 5% OF THE WORK FORCE.

IV. RECRUITMENT

To ensure nondiscrimination in relation to ~~minorities and~~ women, and to foster their full consideration whenever job vacancies occur, we propose to utilize the following recruitment procedures:

- ☒ We will contact a variety of ~~minority and~~ women's organizations to encourage the referral of qualified ~~minority and~~ women applicants whenever job vacancies occur. Examples of organizations we intend to contact are:

NATIONAL ORGANIZATION OF WOMEN
AMERICAN WOMEN IN RADIO AND TELEVISION

- ☒ In addition to the organizations noted above, which specialize in ~~minority and~~ women candidates, we will deal only with employment services, including State employment agencies, which refer job candidates without regard to their race, color, religion, national origin or sex. Examples of these employment referral services are:

JOB SERVICE

- ☒ When we recruit prospective employees from educational institutions such recruitment efforts will include area schools and colleges with ~~minority and~~ women enrollments. Educational institutions to be contacted for recruitment purposes are:

UNIVERSITY OF MONTANA
MONTANA STATE

- ☒ When we place employment advertisements with media some of such advertisements will be placed in media which have significant circulation or viewership or are of particular interest to ~~minority and~~ women. Examples of media to be utilized are:

DAILY INTER LAKE
WHITEFISH PILOT
HUNGRY HORSE NEWS
KALISPELL NEWS
BIGFORK EAGLE

- ☒ We will encourage employees to refer qualified minority and women candidates for existing and future job openings.

V. TRAINING

- ☐ Station resources and/or needs will be such that we will be unable or do not choose to institute programs for upgrading the skills of employees.
- ☒ We will provide on-the-job training to upgrade the skills of employees.
- ☐ We will provide assistance to students, schools, or colleges in programs designed to enable qualified minorities and women to compete in the broadcast employment market on an equitable basis:

School or Other Beneficiary

Proposed Form of Assistance

☐ Other (specify)

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ORIGINAL

JAMES B. HATFIELD, PE
BENJAMIN F. DAWSON III, PE
THOMAS M. ECKELS, PE

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ALICE SPRINGS, NT 5950
AUSTRALIA

ENGINEERING REPORT:

APPLICATION FOR CONSTRUCTION PERMIT
CHANNEL 292 A, 106.3 MHZ
KALISPELL, MT

SKYLINE BROADCASTERS, INC.

9/91

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5. FCC Form 301, Section V-B
6. Statement of Engineer

1. Purpose of Application

This Engineering Report is part of an application for construction permit for a new FM broadcast station at Kalispell, Montana, by Skyline Broadcasters, Inc. The proposed station will operate on FM channel 292 A (106.3 MHz) with an effective radiated power of 1.94 kilowatts (2.88 dBk) at an antenna height above average terrain of 174 meters. The ERP specified is the maximum for Class A facilities at this antenna height, as calculated in accordance with the Commission's Rules.

2. Allocation Considerations

The attached computerized data summary shows that the proposed operation meets the co-channel and adjacent channel mileage spacing requirements for Class A stations as prescribed in §73.207 of the Commission's Rules. Additionally, the attached computerized data summary shows that concurrence was obtained from the Canadian government to upgrade the Kalispell allotment to B1 in the appropriate bi-lateral table. MM Docket No. 88-375 (47) states, "Applications for a vacant Class Allotment which specify facilities in excess of 3 kW at 100 m within the Canadian border zone.....are not acceptable for filing unless the table of allotments in the applicable agreement has already been changed to a higher class. Further, applications for vacant allotments which do not conform to a bi-lateral table but which are accompanied by requests for negotiations to amend the bi-lateral table also are not acceptable for filing." This application is believed to fully comply with these requirements.

FM SEPARATION STUDY

Job Title :KALISPELL, MONTANA FM Separation Buffer 100 km
FCC DB Date : 01/29/91
Channel 292A (106.3 MHz) Coordinates : 48-09-58 114-19-51

Call Status	City State	FCC File No.	Channel Freq.	ERP(kW) HAAT(m)	Latitude Longitude	Bearing deg-Tru	Dist. (km)	Req. (km)
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CBYSFM	Sparwood		289A	0.80 DA	49-43-28	347.6	177.65	54
	BC		105.7	.0	114-51-48		123.65	CLEAR

	Creston		291B		49-09-56	303.7	205.51	149
	BC		106.1	.0	116-40-39		56.51	CLEAR

SPECIAL NEGOTIATED SHORT-SPACED ALLOCATION.

	Kalispell		292A		48-11-42	22.0	3.48	115
PADD	MT	RM7478	106.3	.0	114-18-48		-111.52	SHORT

Proposed to canada as B1 on 900920-Accepted by Canada 901108
PRM

K292CD	Whitefish, etc.		292D		48-30-11	359.0	37.48	0
LIC	MT	BLFT840925MH	106.3	.0	114-20-23		.00	TRANS

TRANSLATOR FOR KMBI, SPOKANE, WA.

	Elkford		293A		50-00-00	351.6	206.24	113
	BC		106.5	.0	114-45-00		93.24	CLEAR

	Fort Macleod		295B		49-43-00	20.8	184.99	71
	AB		106.9	.0	113-25-00		113.99	CLEAR

** End of separation study for channel 292A **